PTO/SB06 (08-03)
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PATEN	T APPLICATION Substit	N FEE DETE		N RECORD		<u> [C</u>	650	178
CLAIMS AS FILED - PART 1 (Column 1) (Column 2)				SMALL ENTITY		QR	OTHER THAN SMALL ENTITY	
FOR	HUAGER FALED	MUMBS	REXTRA	RATE	FEE		RATE	FEE
BASIC FEE D7 CFR 1.18(a))					·	QR		3
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NDEPENDENT CLAIMS	6	,	2	1143.	129	OR	x1•	
ALL TIPLE DEPENDENT O	+5		OR .	+9				
If the difference in colum	TOTAL	660	OR	TOTAL				
, CLAI	MS AS AMENDED	- PART II						
622105 (Column 1)		(Column 2) (Column 3)		SMALL ENTITY		OR	OR OTHER THAN SMALL ENTITY	
ا الموادول	CLARAS REMAINING AFTER NENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TEDNAL FEE
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A POIST PRESENTATION OF MATIFIE DEPENDENT QAM (37 CFR 1,18011)				+5•		OR	+ 4	
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(Column 1)	(Column 2)	(Calumn 3)					
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(6))				+5 .		OR	+5_=	
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1			(Cabres 9)					•
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PRST PRESENTATE	<u> </u>		O R		<u> </u>			
				TOTAL ADOL FEE		OR	ADOL FEE	
** If the "Highest Nurs	nn 1 is less than the ent ther Previously Paid Fo ther Previously Paid Fo	a in this space	is less than 20,	ADO1 FEE 3. ontar 201.	<u> </u>	OR .		<u> </u>

"" If the Trighest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

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